	A.				
Entry Blank—Please Type or Pri	int /0/1				
^	1				
Mr./Artist	DREW Mucen (last name last)				
Permanent 252 OHIO					
L///035 Davi	ime Tel. (216) 323-3045				
Zip	area				
Temporary or Studio Address SAME	SESTER A				
St	creet City				
Dayt	ime Tel. (
Zip	area				
If you do not presently live in one of the counties of the Western Reserve, in which county were you born?					
Collaborator (if any)	fo. Gr				
If Moy Show entries are not accepted or are not sold: ✓ Artist will pick up at Museum. □ Museum should dispose of. □ Museum should ship to artist at artist's expense:					
Street					
City State	Zip				
Special Instructions					
Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.					
When necessary, include instructions or a drawing for assembling and displaying an object.					
Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until May 27, 1990.					
The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.					
Signature	While				
I have received the unsold/unaccepted object(s) in good condition.					

Entry Blanks

Detach entire portion along dotted line and submit with slides, but retain tags

A □ Pair			Photo (s		hy y category
Materials used (medi	ia):	Ga a	9		
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Title			r		
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				(specify category)	
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Title					
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IN THIS SECTION				JBL	
NOT ACCEPTED			NOT ACCEPTED		DATE